



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5
77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

SEP 15 2016

REPLY TO THE ATTENTION OF:

CERTIFIED MAIL 7009 1680 0000 7647 3507
RETURN RECEIPT REQUESTED

Ms. Colleen Andrews
Director of Environmental Services and Linen
Unity Hospital
550 Osbourne Road North East
Fridley, Minnesota 55432

Re: Notice of Violation
Compliance Evaluation Inspection
EPA I.D. No.: MND985686690

Dear Ms. Andrews

On August 16, 2016, a representative of the U.S. Environmental Protection Agency inspected the Unity Hospital facility located in Fridley, Minnesota. As a large quantity generator of hazardous waste, Unity Hospital is subject to the Resource Conservation and Recovery Act, 42 U.S.C. § 6901 *et seq.* (RCRA). The purpose of the inspection was to evaluate Unity Hospital's compliance with certain provisions of RCRA and its implementing regulations related to the generation, treatment and storage of hazardous waste. A copy of the inspection report is enclosed for your reference.

Based on information provided by Unity Hospital, EPA's review of records pertaining to Unity Hospital, and the inspector's observations, EPA has determined that Unity Hospital has unlawfully stored hazardous waste without a permit or interim status as a result of Unity Hospital's failure to comply with certain conditions for a permit exemption under Minnesota Rules (Minn. R.) Part 7045.0292, Subparts 1 and 8 [40 C.F.R. § 262.34(a)-(c)]. EPA has identified the permit exemption conditions with which Unity Hospital was out of compliance at the time of the inspection in paragraphs 1 and 2, below.

Many of the conditions for a RCRA permit exemption are also independent requirements that apply to permitted and interim status hazardous waste management facilities that treat, store, or dispose of hazardous waste (TSD requirements). When a hazardous waste generator loses its permit exemption due to a failure to comply with an exemption condition incorporated from Minn. R. Parts 7045.0552 through 7045.0649 [40 C.F.R. Part 265], the generator: (a) becomes an operator of a hazardous waste storage facility; and (b) simultaneously violates the corresponding

TSD requirement. The exemption conditions identified in paragraphs 1 and 2 are also independent TSD requirements incorporated from Minn. R. Parts 7045.0552 through 7045.0649 [40 C.F.R. Part 265]. Accordingly, each failure of Unity Hospital to comply with these conditions is also a violation of the corresponding requirements in Minn. R. Parts 7045.0552 through 7045.0649 [40 C.F.R. Part 265] (if the facility should have fully complied with the requirements for interim status), or Minn. R. 7045.0450 to 7045.0551 [40 C.F.R. Part 264] (if the facility should have been permitted).

STORAGE OF HAZARDOUS WASTE WITHOUT A PERMIT OR INTERIM STATUS AND VIOLATIONS OF TSD REQUIREMENTS

At the time of the inspection, Unity Hospital was out of compliance with the following large quantity generator permit exemption conditions, which are also independent TSD requirements violated by Unity Hospital:

1. Training

A large quantity generator of hazardous waste must have a program of classroom instruction or on-the-job training that teaches facility personnel to perform their duties in a way that ensures the facility's compliance with requirements of RCRA. This program must be directed by a person trained in hazardous waste management procedures, and must include instruction that teaches facility personnel hazardous waste management procedures (including contingency plan implementation) relevant to the positions in which they are employed. *See*, Minn. R. Parts 7045.0292, Subpart 1, Item G; and 7045.0558 Subparts 1 through 3 [40 C.F.R. §§ 262.34(a)(4) and 265.16(a)]. Facility personnel must successfully complete this training program within six months after the date of their employment or assignment to a facility or to a new position at a facility, and must take part in an annual review of this initial training thereafter. *See*, Minn. R. Parts 7045.0292, Subpart 1, Item G; and 7045.0558 Subparts 4 and 5 [40 C.F.R. §§ 262.34(a)(4) and 265.16(b) and (c)].

With respect to this training program, a large quantity generator must maintain the following documents and records at its facility:

- 1) The job title for each position at the facility related to hazardous waste management and the name of the employee filling each job;
- 2) A written job description for each position at the facility related to hazardous waste management;
- 3) A written description of the type and amount of both introductory and continuing training that will be given to each person filling a position at the facility related to hazardous waste management; and

4) Records that document that the training or job experience described above has been given to and completed by facility personnel. *See*, Minn. R. Parts 7045.292 Subpart 1, Item G, and 7045.0558 Subpart 6 [40 C.F.R. §§ 262.34(a)(4) and 265.16(d)].

At the time of the inspection, Unity Hospital did not have a list of each position at the facility related to hazardous waste management and the name of the employee filling such position(s).

2. Contingency Planning

A large quantity generator must have a written contingency plan which includes, among other items, the names, addresses, and office and home telephone numbers of all persons qualified to act as emergency coordinator. *See*, Minn. R. Parts 7045.0292, Subpart 1, Item G; and 7045.0572, Subpart 4, Item D. [40 C.F.R. §§ 262.34(a)(4) and 265.52(d)]. At the time of the inspection, Unity Hospital's contingency plan did not include the home addresses of those designated to act as emergency coordinator.

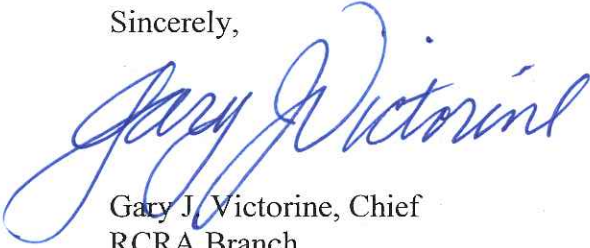
Summary: By failing to comply with the conditions for a permit exemption, above, Unity Hospital became an operator of a hazardous waste storage facility, and was required to obtain a Minnesota hazardous waste storage permit. Unity Hospital failed to apply for such a permit. Unity Hospital's failure to apply for and obtain a hazardous waste storage permit violated the requirements of Minn. R. 7001.0030; 7001.0520 Subpart 1 (A); 7001.0530; and 7001.0550 [40 C.F.R. §§ 270.1(c), and 270.10(a) and (d)]. Any failure to comply with a permit exemption condition incorporated from Minn. R. 7045.0552 through 7045.0649 is also an independent violation of the corresponding TSD requirement.

At this time, EPA is not requiring Unity Hospital to apply for a Minnesota hazardous waste storage permit so long as it immediately establishes compliance with the conditions for a permit exemption outlined in paragraphs 1 and 2, above.

After the inspection, as documented in emails to EPA dated August 18 and 24, 2016, you took certain actions to establish compliance with the permit exemption conditions. Your email did not include any actions you may have taken related to the condition in paragraph 2, regarding the job title for each position at the facility related to hazardous waste management and the name of the employee filling each job. According to Section 3008(a) of RCRA, EPA may issue an order assessing a civil penalty for any past or current violation, requiring compliance immediately or within a specified time period, or both. Although this letter is not such an order or a request for information under Section 3007 of RCRA, 42 U.S.C. § 6927, we request that you submit a response in writing to us no later than 30 days after receipt of this letter documenting the actions, if any, you have taken related to paragraphs 2. You should submit your response to Todd Brown, U.S. EPA, Region 5, 77 West Jackson Boulevard, LR-8J, Chicago, Illinois 60604.

If you have any questions regarding this letter, please contact Mr. Brown, of my staff, at (312) 886-6091 or at brown.todd@epa.gov.

Sincerely,



Gary J. Victorine, Chief
RCRA Branch

Enclosure

cc: John Elling, Minnesota Pollution Control Agency (John.Elling@state.mn.us)
Laura M. Schmidt Anoka County Community Health and Environmental Services
(laura.schmidt@co.anoka.mn.us)



U. S. Environmental Protection Agency
Region 5, Land and Chemicals Division
RCRA Branch
77 West Jackson Boulevard
Chicago, Illinois 60604

RCRA COMPLIANCE EVALUATION INSPECTION REPORT

SITE NAME: Unity Hospital

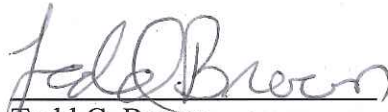
EPA ID NUMBER: MND985686690

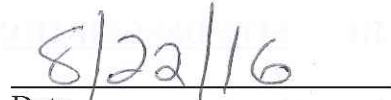
ADDRESS: 550 Osbourne Road North East
Fridley, Minnesota 55432

DATE OF INSPECTION: August 16, 2016

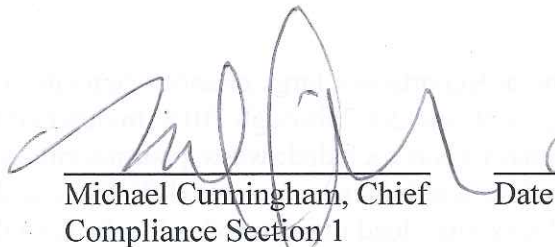
EPA INSPECTOR: Todd C. Brown
Environmental Scientist

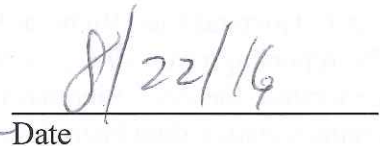
PREPARED BY:


Todd C. Brown
Compliance Section 1


Date 8/22/16

APPROVED BY:


Michael Cunningham, Chief
Compliance Section 1


Date 8/22/16

I. PURPOSE OF INSPECTION

The purpose of this inspection was to evaluate the compliance of Unity Hospital, Part of Allina Health, Fridley, Minnesota (Unity Hospital), with federal and state regulations at 40 C.F.R. Parts 260 through 279, and Minnesota Rules, Chapter 7045, regarding the generation, transport, treatment, storage and disposal of hazardous waste and used oil.

II. PARTICIPANTS

Inspector(s):

Todd Brown
Environmental Scientist
U.S. EPA

Laura M. Schmidt
Environmental Health Specialist
Anoka County Community Health and
Environmental Services

Site Representative(s):

Colleen Andrews
Director of Environmental Services and Linen
Unity Hospital

III. SITE DESCRIPTION

Unity Hospital was constructed in the 1960's, and later expanded in the 1970's. There are currently 165 hospital beds in the 300,000 ft² facility. There are approximately 1,200 employees in total.

Unity Hospital filed Biennial Reports as a large quantity generator (LQG) of hazardous waste for the reporting years 1997, 1999, and 2007 through 2015. In descending order of amount generated, the 2015 Biennial Report included: waste pharmaceuticals (P/U-listed and characteristic), dual hazardous and infectious wastes (P/U-listed and characteristic), flammable liquids (non-halogenated solvents), lead indicators/lead vials, ignitable/corrosive lab pack waste, and Drug Enforcement Agency controlled waste (chloral hydrate, U034). Hazardous wastes are accumulated and stored in containers at various locations throughout the hospital including the laboratory, pharmacy; and two dedicated waste storage areas, one of which is a small outdoor shed. Used oil and universal waste batteries/lamps are also generated.

Neither the EPA nor Minnesota Pollution Control Agency had previously inspected Unity Hospital under RCRA.

IV. OPENING CONFERENCE

The inspector arrived at approximately 8:53 a.m. on August 16, 2016, and convened with Ms. Laura Schmidt, Anoka County Community Health and Environmental Services. The inspector presented his credentials to Ms. Colleen Andrews, Director of Environmental Services and Linen, and conducted an opening conference, during which time he interviewed Ms. Andrews on Unity Hospital's hazardous waste management activities. Information provided by Ms. Andrews in response is discussed in Section III, above.

V. SITE TOUR

The inspector toured the site with Ms. Andrews and Ms. Schmidt. The tour included, but was not limited to: the two hazardous waste storage areas, maintenance shop, laboratory, pharmacy, and several selected hospital rooms where "satellite" accumulation containers are located.

A hazardous and bio-waste storage area is located in the basement of the main hospital building. Five cardboard cylinders of universal waste batteries (photograph 3) were located in this area. Each container was closed, labeled, and marked with an accumulation start date of either June 3 or July 22, 2016. A metal flammables storage cabinet in the area was found to be empty. One waste cathode-ray-tube monitor was located in a large cardboard container among other electronic waste (photograph 4). Weekly container area inspection records were on file in this area.

One 55-gallon container of dual hazardous/infectious waste was located within a separate room of the hazardous and bio-waste storage area. The container was closed, labeled and marked with an accumulation start date of July 29, 2016 (photograph 1). One container of hazardous aerosol can waste was also located in this area (photograph 2). The container was closed, labeled and marked with an accumulation start date of July 15, 2016. Additional weekly container inspection records were on file in this area.

Outside, in close proximity to the afore-mentioned hazardous and bio-waste storage area, sits a small hazardous/flammables waste storage shed. At the time of the inspection, the shed contained one 55-gallon container of hazardous waste (ignitable alcohol/xylene), and four containers of used oil (three buckets and one 55-gallon container, photographs 5 – 7). All of the containers were labeled and closed. The container alcohol/xylene waste was marked with an accumulation start date of July 5, 2016. Weekly container inspection logs were on file at the shed.

While at the Maintenance Shop, the inspector observed three cardboard containers of universal waste lamps, waste non-PCB ballasts, and "universal waste broken lamps for recycling" (photograph 8). The containers of universal waste lamps and non-PCB ballasts were marked with an accumulation start date of May 20, 2016. The container of broken lamps was marked with an accumulation start date of October 30, 2015 (photograph 9). The inspector opened the container and observed what appeared to be a single broken fluorescent lamp.

Unity Hospital has one laboratory, located in room 1665. A small metal flammable cabinet labeled, "UTY Flame 2" and "Hazardous Waste Satellite Accumulation Center" is located here. Fourteen containers of (1)-gallon capacity or less were located in the cabinet. All were labeled; though only three as hazardous waste (photograph 10). Those labeled hazardous waste contained "fixative waste," "diffquick fixative waste," and "stain waste." Laboratory personnel confirmed the remaining containers in the cabinet were not waste. Various concentrations of alcohols and xylene were among the containers of reportedly non-wastes.

Unity Hospital has a single pharmacy. Hazardous pharmaceutical wastes, along with non-hazardous pharmaceutical waste, are accumulated in 12-gallon containers (photograph 11). The containers are labeled, "Pharmaceutical Drug Waste Only" along with the words, "Hazardous Waste Satellite Accumulation Container." At the time of the inspection, five such containers were located at the pharmacy. Four of the containers were marked with accumulation start dates. Each accumulation start date was less than 90 days before the date of the inspection. One 55-gallon container of dual hazardous/infectious waste, plus four containers of chemotherapy waste were located in a separate room within the pharmacy.

The inspector visited the location of several "satellite accumulation" containers for hazardous waste throughout the hospital, which included the Emergency Room (1440 Med Room North), Ambulatory Clinic, Soiled Utility Room, 1020 Med. Room, and 1004 Med. Room. All of the containers observed at these locations were labeled, closed, in good condition, and totaled less than 55-gallon per location.

VI. RECORDS REVIEW

The inspector reviewed Unity Hospital's contingency plan, RCRA-related training records, hazardous waste manifests, and land disposal restriction forms at Ms. Anderson's office. Container storage area inspection logs were reviewed during the site tour.

The hazardous waste contingency plan did not include the addresses of those listed to serve as emergency coordinator.

Five Unity Hospital personnel (three "lead" employees, and two supervisors) take an off-site course regarding hazardous waste management provided by Anoka County. Ten employees whose duties involve directing hazardous waste from generation points (e.g., lab, pharmacy etc.) to storage locations complete an in-house training. At the time of the inspection, records documenting completion of the afore-mentioned courses in 2015 could not be located. Also, Unity Hospital does not maintain a list of employees by job title who are required to take the afore-mentioned training.

Unity Hospital also maintains annual training certificates for Stericycle employees engaged in off-site transport of hazardous waste generated at Unity Hospital.

Hazardous waste manifests were on-file dating back at least three years. Land disposal restriction notifications were on file with the manifest records. The inspector did not observe any deficiencies with these documents.

CLOSING CONFERENCE

The inspector conducted a closing conference with Ms. Anderson before departing. At that time, the lack of emergency coordinator addresses and 2015 RCRA training documentation were identified as potential compliance issues.

VII. POST INSPECTION INFORMATION

On August 18, 2016, Ms. Andrews provided the following records to the inspector via email (saved in official EPA email records system).

- 33 certificates of training for an 8 hour annual refresher course entitled, Hazardous Waste Operations and Emergency Response, from Stericycle Environmental Solutions, in January 2016.
- Spread sheet detailing employee completion of training courses entitled Environmental Management and Hazardous Waste and DOT Infectious Waste Training in 2016.
- Updated Emergency Coordinator information from Unity Hospital's contingency plan.

Attachment

- A. Inspection Photographs
- B. MPCA Large Quantity Generator Compliance Evaluation Inspection Checklist

**Attachment A: Photographs for Unity Hospital, Part of Allina Health (MND985686690),
Fridley, Minnesota**

Photo Number 885

Photo Filename DSCN0885.JPG

Date/Time 8/16/2016
9:11:42 AM

Photographer Todd Brown

Description

55-gallon container of dual
hazardous/infectious waste in the Hazardous
and Bio-waste Storage Room.



Photo Number 886

Photo Filename DSCN0886.JPG

Date/Time 8/16/2016
9:13:26 AM

Photographer Todd Brown

Description

Aerosol can waste located in the Hazardous
and Bio-waste Storage Room.



**Attachment A: Photographs for Unity Hospital, Part of Allina Health (MND985686690),
Fridley, Minnesota**

Photo Number 887

Photo Filename DSCN0887.JPG

Date/Time 8/16/2016
9:14:12 AM

Photographer Todd Brown

Description

Five containers of universal waste batteries located in the Hazardous and Bio-waste Storage Room.



Photo Number 888

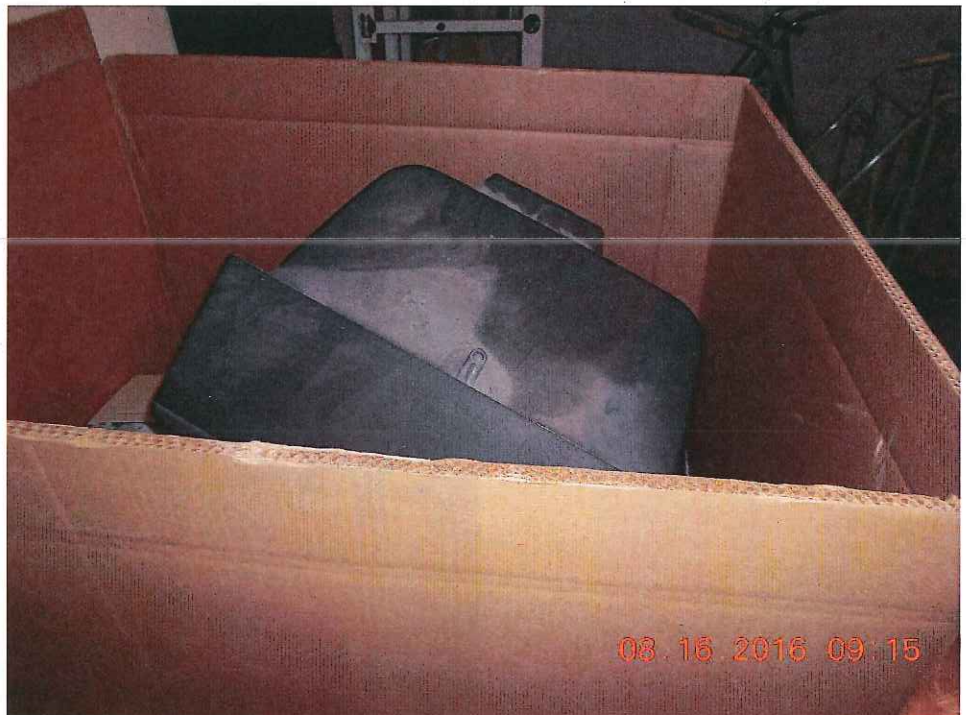
Photo Filename DSCN0888.JPG

Date/Time 8/16/2016
9:15:26 AM

Photographer Todd Brown

Description

Cathode-ray-tube monitor in the Hazardous and Bio-waste Storage Room.



**Attachment A: Photographs for Unity Hospital, Part of Allina Health (MND985686690),
Fridley, Minnesota**

Photo Number 889
Photo Filename DSCN0889.JPG
Date/Time 8/16/2016
9:21:38 AM
Photographer Todd Brown

Description

55-gallon container of ignitable solvent waste (alcohol/xylene) located in the Hazardous/Flammables Waste Storage Shed.

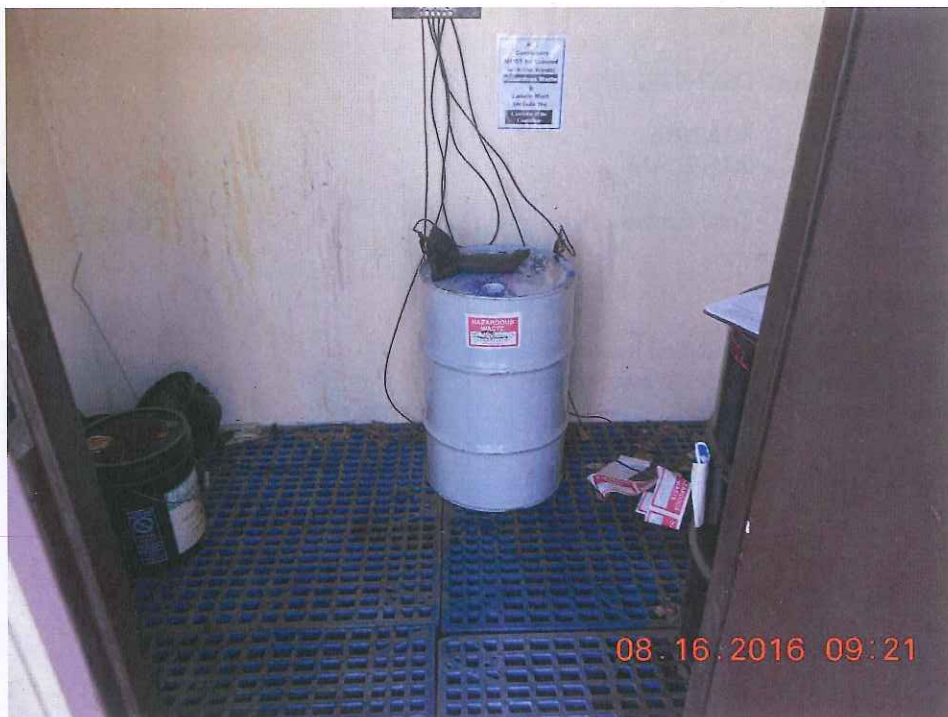
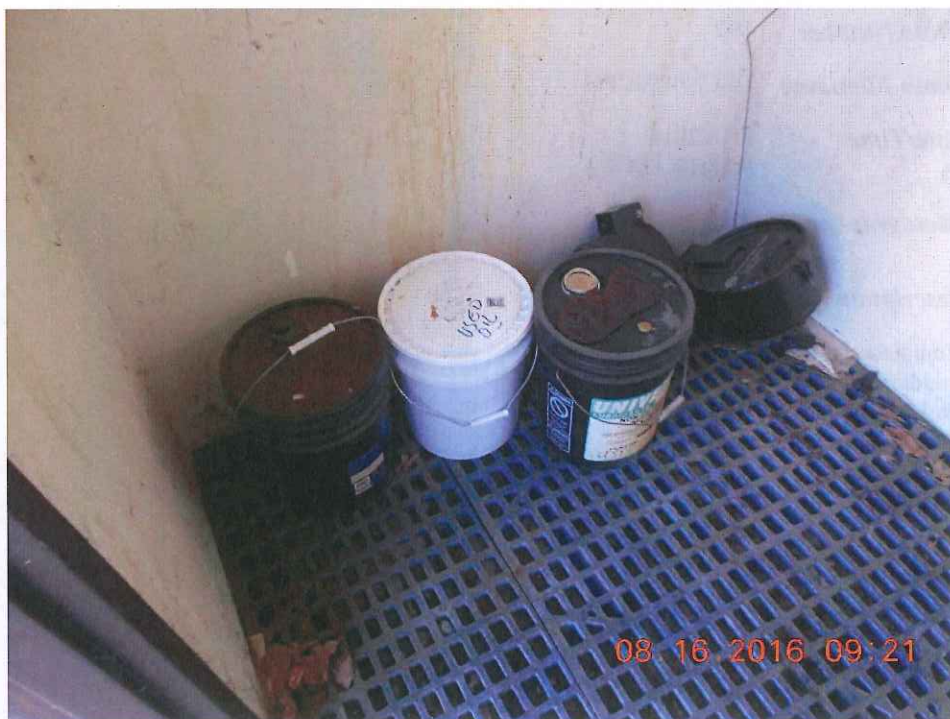


Photo Number 890
Photo Filename DSCN0890.JPG
Date/Time 8/16/2016
9:21:46 AM
Photographer Todd Brown

Description

Buckets of used oil located in the Hazardous/Flammables Waste Storage Shed.



Attachment A: Photographs for Unity Hospital, Part of Allina Health (MND985686690), Fridley, Minnesota

Photo Number 891

Photo Filename DSCN0891.JPG

Date/Time 8/16/2016
9:21:52 AM

Photographer Todd Brown

Description

55-gallon container of used oil located in the Hazardous/Flammables Waste Storage Shed.



Photo Number 892

Photo Filename DSCN0892.JPG

Date/Time 8/16/2016
9:28:10 AM

Photographer Todd Brown

Description

Containers of universal waste lamps (tall middle), non-PCB ballasts (right), and broken universal waste lamps (left) at the Maintenance Department.



**Attachment A: Photographs for Unity Hospital, Part of Allina Health (MND985686690),
Fridley, Minnesota**

Photo Number 893
Photo Filename DSCN0893.JPG
Date/Time 8/16/2016
9:28:18 AM
Photographer Todd Brown

Description

Labeling on container of broken waste
lamps featured in photograph 8.

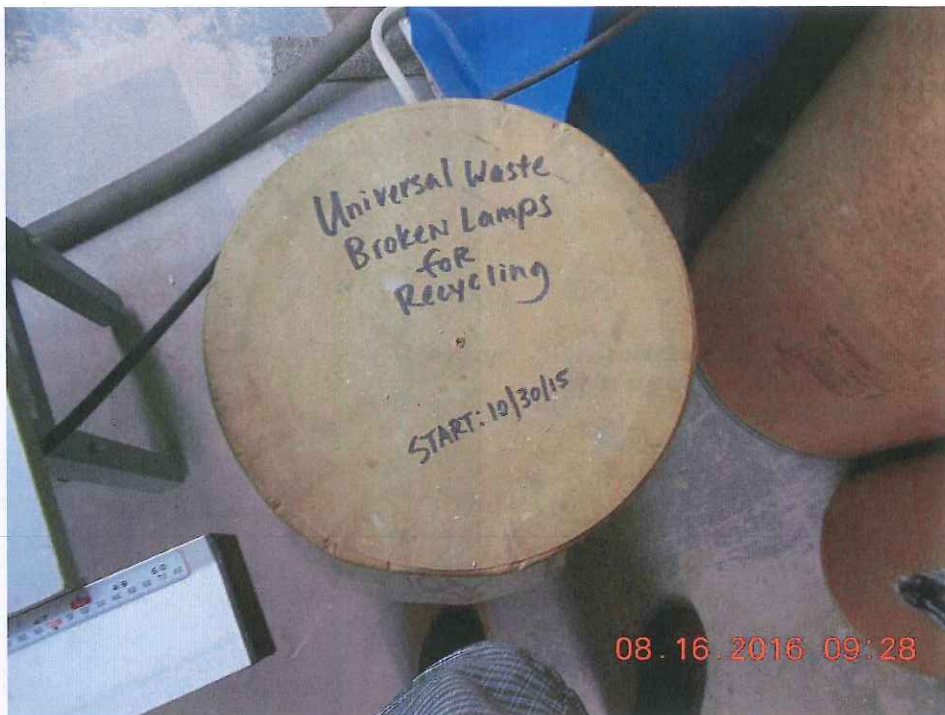


Photo Number 894
Photo Filename DSCN0894.JPG
Date/Time 8/16/2016
9:44:50 AM
Photographer Todd Brown

Description

Three containers of hazardous waste (yellow
labels) located in the UTY Flame 2
Hazardous Waste Satellite Accumulation
Center at the laboratory of Unity Hospital.



Attachment A: Photographs for Unity Hospital, Part of Allina Health (MND985686690), Fridley, Minnesota

Photo Number 895

Photo Filename DSCN0895.JPG

Date/Time 8/16/2016
9:56:48 AM

Photographer Todd Brown

Description

Example of the containers used to accumulate pharmaceutical waste at the Unity Hospital Pharmacy.



Minnesota Pollution Control Agency

Report Title: Large Quantity Generator (LQG) Compliance Evaluation Inspection Checklist

Preferred ID: MND985686690 Regulated Party: *Unity Hospital*

Date: *8/16/16* Inspector: *Todd Brown, U.S. EPA Region 5*

G1: Licensing / EPA / Permits

Rule	Requirement	Compliance Status	Remarks
7045.0221	Has Regulated Party obtained a generator identification number?	<i>YES</i>	
7045.1020 A	Metro Area - Does the Regulated Party have an approved license?	<i>YES</i>	
7045.0225 1	Outstate - Does the site have a current hazardous waste generator license?	<i>N.A.</i>	
7045.0230 I, B	Outstate - Did the Regulated Party include all hazardous waste streams on its license application?	<i>N.A.</i>	
7045.0225 2	Is the Regulated Party's license displayed in a public area at the licensed site?	<i>N.I.</i>	
7001.0520 I, A	Does the Regulated Party operate as a TSD without a permit?	<i>NO</i>	
MS 116.48 1	Are aboveground tanks >500 G registered with the MPCA? Are underground tanks registered with the MPCA?	<i>N/A</i>	

G1: Waste Evaluation

Rule	Requirement	Compliance Status	Remarks
7045.0214 1	Have wastes been evaluated within 60 days of the date they were initially generated?	<i>N.I.</i>	
7045.0294 3	Are test result records of waste analyses kept for 3 years from the last time the waste was sent to a TSDF (on- or off-site)?	<i>N.I.</i>	

G1: General Management for Generators

Rule	Requirement	Compliance Status	Remarks
7045.0208 1	Is hazardous waste properly disposed of?	Yes	
7045.0208 1, E	Does the Regulated Party comply with the POTW requirements for sewer hazardous waste?	No/Ao	
7045.0294 5	Are the required records (training, analytical results, inspection reports, license renewal app, exception reports, manifests) located at the licensed site and available for inspection?		2015 training records not available
7045.0568 1	Have emergency response arrangements been made with local authorities and outside providers? (fire, police, local hospital, emergency responders)	Yes	Per Contingency Plan
7045.0568 3	Has the Regulated Party documented in its operating record the arrangements made with local emergency authorities?	Yes	
7045.0655 3, A	If there is an elementary neutralization unit, a pretreatment unit and/or waste water treatment unit, does the owner or operator conduct timely inspections of the unit(s) for malfunction, deterioration, operator error and discharges?	No/Ao	
7045.0655 3, B	If there is an elementary neutralization unit, a pretreatment unit and/or waste water treatment unit, does the Regulated Party follow a written inspection schedule for inspection of all monitoring equipment, safety and emergency equipment, security devices and operating and structural equipment?	No/Ao	
7045.0655 3, E	If there is an elementary neutralization unit, a pretreatment unit and/or waste water treatment unit, are all applicable inspection (and repair) records (logs) kept for at least 3 years and available on-site?	No/Ao	
7045.0845	Does the Regulated Party properly manage used oil?	Yes	
7045.0895 4	Has used oil accepted from or given to another business to be burned for energy recovery been tested to determine that it is on-specification?	No/Ao	

G1: General Management for Generators

Rule	Requirement	Compliance Status	Remarks
7045.0855 4, C	Does the Regulated Party keep records of every shipment of used oil leaving the generator site for at least three years?	Yes	
7045.0805	Does the Regulated Party properly manage used oil-contaminated waste?	No	
7045.0855 4, C	Does the Regulated Party keep records of every shipment of used oil-contaminated waste leaving the generator site for at least three years?	Yes	
7045.0990	Is the Regulated Party properly managing used oil filters?	No	
7045.0990 3, C, 3	Does the Regulated Party keep records of all used oil filters taken off-site by used oil-filter transporters for at least three years?	No	

G1: Preparedness & Prevention

Rule	Requirement	Compliance Status	Remarks
7045.0566 2	Is hazardous waste managed to prevent or minimize releases?	Yes	
7045.0566 3, A	Is a suitable alarm or communication system in place to provide emergency instructions to Regulated Party personnel?	Yes	
7045.0566 3, B	Is emergency communication equipment available to summon outside emergency responders?	Yes	
7045.0566 3, C	Is fire control equipment, decontamination equipment, and spill control equipment available?	Yes	

G1: Preparedness & Prevention

Rule	Requirement	Compliance Status	Remarks
7045.0566 3, D	Is water available in adequate volume for fire control (i.e., firehose, sprinkler system and/or foam equipment) ?	YES	
7045.0566 4	Is emergency equipment tested and maintained?	YES	
7045.0566 5	Does the Regulated Party provide all personnel involved in hazardous waste being poured, mixed, spread, or otherwise handled with immediate access to an internal alarm or emergency communication device?	YES	
7045.0566 6	Is aisle space adequate for emergency operations (like fire fighting, spill cleanup, etc)?	YES	
7060.0600 2	Has the Regulated Party discharged waste or pollutants to the unsaturated zone, through spills, dumping, sewerage or other means?	NO	
7045.0275 2	If the Regulated Party had a release to the environment did the Regulated Party immediately notify the agency?	N.A.	
7045.0275 3	If the Regulated Party has had a release, did the Regulated Party recover as rapidly and as thoroughly as possible, any HW that has leaked, spilled, or otherwise escaped a container?	N.A.	
7045.0855 2, D	Upon detection of a release of used oil to the environment (not originating from a UST) did the Regulated Party stop the release, contain the released used oil, clean up and manage properly the released used oil and other materials contaminated with used oil, and repair or replace any leaking used oil storage equipment prior to returning it to service to prevent future releases?	N.A.	

G1: Storage Requirements

Rule	Requirement	Compliance Status	Remarks
7045.0292 1, F	Are hazardous waste containers & tanks properly labeled with the words "Hazardous Waste" and a description that clearly identifies their contents to employees and emergency personnel?	Yes	
7045.0292 1, C	Are hazardous waste containers and tanks labeled with the waste accumulation start date and is it visible for inspection? OR Is the accumulation start date recorded in a clear and legible log for non-shipping containers or tanks?	Yes	
7045.0292 1, A	Has the generator stored HW for more than 90 days beyond the waste accumulation start date?	NO	
7045.0292 1, D	Are hazardous waste storage areas (outdoors) protected from unauthorized access and inadvertent damage from vehicles & equipment?	Yes	
7045.0292 1, E	Are hazardous waste containers that hold free liquid placed on an impermeable containment surface? If outdoors, is the surface curbed?	Yes	
7045.0626 2, A	Are hazardous waste storage containers in good condition and leakproof?	Yes	
7045.0626 2, B	Are there suitable leakproof covers for the hazardous waste containers?	Yes	
7045.0626 3	Are hazardous waste storage containers compatible with the waste stored in them?	Yes	
7045.0626 4	Are hazardous waste storage containers closed? Are waste containers which can be degraded when exposed to moisture or sunlight covered by an overhead roof or other suitable covering that does not hide the labels?	Yes	
7045.0626 5	Are weekly inspections of hazardous waste containers and their storage areas conducted AND documented?	Yes	

G1: Storage Requirements

Rule	Requirement	Compliance Status	Remarks
7045.0626 6	Are incompatible wastes adequately separated?	Yes	
7045.0292 8, B,2	Are satellite accumulation containers properly labeled with "Hazardous Waste" and a clear description of their contents?	Yes	
7045.0292 8, C,2	For satellite accumulation containers, if located away from the point of generation, are they inspected weekly, and are written records kept?	No/A	
7045.0292 8, D,1	For satellite accumulation containers, is fill date marked on the containers?	Yes	
7045.0292 8, D,2	For satellite accumulation containers, are they moved within 3 days of fill date to storage area?	Yes	
7045.0855 2, C	If used oil is stored, is it stored in containers or tanks that are in good condition, stored on impermeable surfaces, kept closed, and labeled "Used Oil" (including tanks, containers and piping)?	Yes	
7045.0855 2, C	Are wastes contaminated with used oil stored in containers or tanks that are in good condition, on impermeable surfaces, closed, and labeled "Used Oil" or "Used Oily Waste"?	N.A.	
7045.0990 3, A	If used oil filters are stored, are they stored in containers that are closed, leakproof and labeled "Used Oil Filters"?	N.A.	
273.14 (a)	Are universal waste batteries (each battery), or a battery storage container, labeled with: "Universal Waste-Battery(ies)," or "Waste Battery(ies)," or "Used Battery(ies)"?	Yes	
273.13 (a)	Are universal waste batteries (lead acid, NiCad, etc) that show evidence of leakage, spillage, or damage stored in a closed, structurally sound, compatible container?	No/A	

G1: Storage Requirements

Rule	Requirement	Compliance Status	Remarks
273.14 (e)	Are containers of universal waste lamps labeled with: "Universal Waste-Lamp(s)" or "Waste Lamp(s)" or "Used Lamp(s)"?	Yes	
273.13 (d)	Are universal waste lamps stored in closed containers that are structurally sound, adequate to prevent breakage, and compatible? Do containers lack evidence of leakage, spillage, or damage?	Yes	
273.13 (c)	Is mercury containing equipment stored in closed containers that are structurally sound, compatible with the contents of the device? Does the container lack evidence of leakage, spillage, or damage?	N.A	
273.14 (d)	Is mercury containing equipment (i.e. each device) or a container in which the equipment is contained labeled with: "Universal Waste - Mercury Containing Equipment," "Waste Mercury-Containing Equipment," or "Used Mercury -Containing Equipment"?	N.A	

G1: Manifests

Rule	Requirement	Compliance Status	Remarks
7045.0261 1	Are shipments of hazardous waste made without using a manifest? (exceptions for VSQGs)	NO	
7045.0261 7	Do manifests contain ALL of the following?: Manifest document number, generator data, transporter data, facility data, waste data, required signatures & dates, and a 24 hour emergency number. (document problem manifests in remarks and Description of Violation)	Yes	
7045.0265 1, D	Have copies of manifests signed by the generator and transporter been sent to the MPCA within five working days of the initial transporter's acceptance of the waste?	N.A	
7045.0265 4, A	Have copies of manifests signed by the facility been sent to the MPCA within 40 days of the acceptance of the waste by the facility?	N.A	

G1: Manifests

Rule	Requirement	Compliance Status	Remarks
7045.0298	If applicable, has the generator submitted to the MPCA an exception report for manifest copies not received back from the TSDF within 45 days of the date the waste was initially shipped?	N.A.	
7045.0294 1	Are signed facility copies of manifests available for review for 3 years from the date material was accepted by the initial transporter?	Yes	
7045.0302 1	If Regulated Party exports hazardous waste, are all applicable rules being complied with? (notification, consent, EPA acknowledgement of consent, shipping papers or manifests, etc)	N.A.	

G1: Land Disposal Restrictions

Rule	Requirement	Compliance Status	Remarks
268.7 (a), (2)	For waste or contaminated soil that does not meet treatment standards, has the Regulated Party sent a one-time land disposal restriction notification to the receiving treatment or storage facility? Is a copy of the notification available at the Regulated Party's site? Have new notifications been sent when there are changes in waste streams and to any new receiving facilities?	Yes	

G1: Personnel Training

Rule	Requirement	Compliance Status	Remarks
7045.0558 1	Have employees that manage hazardous waste completed a hazardous waste training program?	Yes	2015 Records Missing
7045.0558 2	Does the Regulated Party have a hazardous waste program director trained in hazardous waste management procedures?	Yes	Offsite by Anoka + Ms. Andrews
7045.0558 3	Does the training program include hazardous waste management and emergency response procedures relevant to the positions held by facility personnel?	Yes	

G1: Personnel Training

Rule	Requirement	Compliance Status	Remarks
7045.0558 4	Are new employees trained in hazardous waste management within 6 months of hire or transfer?	No	
7045.0558 5	Is refresher training regarding the management of hazardous waste provided at least once per calendar year?		2015 missing
7045.0558 6, A	Does the Regulated Party maintain training records which include a job title for each position at the facility related to hazardous waste?	No	
7045.0558 6, B	Do the records include a job description for each position related to hazardous waste?	No	
7045.0558 6, C	Is a written description of the type and amount of training (initial & continuing) documented for each position related to hazardous waste?	Yes	
7045.0558 6, D	Has the Regulated Party kept records that document that the initial training and annual review training has been given?	No	2015 missing
7045.0558 7	Have training records been maintained for lifetime of facility (or 3 years after an employee leaves.)?		2015 missing

G1: Contingency Plan

Rule	Requirement	Compliance Status	Remarks
7045.0572 2	Does the Regulated Party have a contingency plan?	Yes	
7045.0574 1	Does the Regulated Party have an Emergency Coordinator on-site or on-call, and does s/he have authority to act (commit resources?)	Yes	

G1: Contingency Plan

Rule	Requirement	Compliance Status	Remarks
7045.0572 4, A	Does the contingency plan specify employees' emergency response actions?	Yes	
7045.0572 4, C	Does the plan describe arrangements agreed to with local emergency responders?	Yes	
7045.0572 4, D	Does the plan include up-to-date name, address and Home and Work phone numbers for emergency coordinators?	No	Addresses missing
7045.0572 4, E	Does the contingency plan include an up-to-date emergency equipment list?	Yes	
7045.0572 4, F	Is there an evacuation plan for employees that includes signals used to begin evacuation, and primary and alternate evacuation routes?	Yes	
7045.0572 5, A	Is a copy of the contingency plan maintained on-site?	Yes	
7045.0572 5, B	Have copies of the contingency plan been submitted to local authorities and emergency response teams?	Yes	
7045.0572 6	Has the contingency plan been amended when necessary? (rule change, emerg.eqpt change, process change, emerg. coord. change, plan failed)	Yes	